

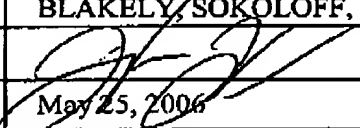
FACSIMILE: (714) 557-3347

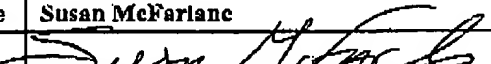
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MAY 25 2006

<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>		Application No.	09/844,161
		Filing Date	April 27, 2001
		First Named Inventor	J. Chris Russell
		Art Unit	2165
		Examiner Name	Michael J. Hicks
Total Number of Pages in This Submission	11	Attorney Docket Number	80398P458

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 60px; width: 100%;"></div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	William W. Schaal, Reg. No. 39,018 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	May 25, 2006

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office.			
Typed or printed name	Susan McFarlane		
Signature		Date	May 25, 2006

Based on PTO/SR/21 (09-04) as modified by USKaly, Sokoloff, Taylor & Zafman (wtr) 11/30/2005.  
 SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

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**MAY 25 2006**

<b>FEE TRANSMITTAL</b> <b>for FY 2005</b> <small>Patent fees are subject to annual revision.</small>		Complete if Known	
		Application Number	09/844,161
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		Filing Date	April 27, 2001
		First Named Inventor	J. Chris Russell
<b>TOTAL AMOUNT OF PAYMENT</b> (\$) 0.00		Examiner Name	Michael J. Hicks
		Art Unit	2165
		Attorney Docket No.	80398P458

**METHOD OF PAYMENT** (check all that apply)

- ☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_
- ☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP
- For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- ☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayment of fee(s) ☐ Credit any overpayments  
 under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

**FEE CALCULATION**

**1. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
17	20*	0	\$0.00
Independent Claims	3	5*	0
Multiple Dependent			

Large Entity	Small Entity	Fee Description
Fee Code (\$)	Fee Code (\$)	
1202 50	2202 25	Claims in excess of 20
1201 200	2201 100	Independent claims in excess of 3
1203 380	2203 100	Multiple Dependent claim, if not paid
1204 780	2204 385	**Reissue independent claims over original patent
1205 300	2205 150	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (1) (\$) 0.00

\*for number previously paid, if greater. For Reissues, see below

**2. ADDITIONAL FEES**

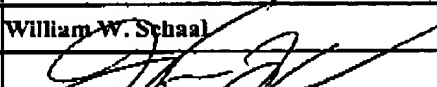
Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Code (\$)		
1051 130	2051 65			Surcharge - late filing fee or oath	
1052 50	2052 25			Surcharge - late provisional filing fee or cover sheet	
2053 130	2053 130			Non-English specification	
1251 120	2251 60			Extension for reply within first month	
1252 450	2252 225			Extension for reply within second month	
1253 1,020	2253 610			Extension for reply within third month	
1254 1,500	2254 785			Extension for reply within fourth month	
1255 2,160	2255 1,080			Extension for reply within fifth month	
1401 500	2401 250			Notice of Appeal	
1402 500	2402 250			Filing a brief in support of an appeal	
1403 1,000	2403 500			Request for oral hearing	
1451 1,510	2451 1,610			Petition to institute a public use proceeding	
1460 130	2460 130			Petitions to the Commissioner	
1807 50	1807 50			Processing fee under 37 CFR 1.17(a)	
1806 180	1806 180			Submission of Information Disclosing Stmt	
1809 780	1809 385			Filing a submission after final rejection (37 CFR § 1.129(a))	
1810 780	2810 385			For each additional invention to be examined (37 CFR § 1.129(b))	

Other fee (specify) \_\_\_\_\_

SUBTOTAL (2) (\$) \_\_\_\_\_


**SUBMITTED BY**

Complete (if applicable)

Name (Print/Type)	William W. Schaal	Registration No. (Attorney/Agent)	39,018	Telephone	(714) 557-3800
Signature		Date	05/25/06		

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (w/r) 12/15/2004  
 SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460

MAY 25 2006

<b>SUBMITTED BY</b>				<b>Complete (if applicable)</b>	
<b>Name (Print/Type)</b>	William W. School	<b>Registration No.</b> (Attorney/Agent)	39,018	<b>Telephone</b>	(714) 557-3800
<b>Signature</b>				<b>Date</b>	05/25/06

PAGE 4/12 \* RCVD AT 5/25/2006 7:49:28 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-3/20 \* DNIS:2738300 \* CSID:7145573347 \* DURATION (mm-ss):03-46

Appl. No. 09/844,161  
Amdt. Dated 05/25/2006  
Reply to Final Office Action of March 30, 2006

**RESPONSE UNDER 37 C.F.R. 1.116  
EXPEDITED PROCEDURE  
EXAMINING GROUP 2165**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Application No. : 09/844,161  
Applicant : J. Chris Russell  
Filed : 04/27/2001  
TC/A.U. : 2165  
Examiner : Michael J. Hicks

Confirmation No. 1783

Docket No. : 80398P458  
Customer No. : 8791

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Commissioner for Patents  
PO Box 1450  
Alexandria VA 22313-1450

**AMENDMENT AND RESPONSE UNDER 37 CFR §1.116**

Sir:

In response to the Office Action of March 30, 2006, please amend the above-identified application as follows:

**Amendments to the Claims** are reflected in the listing of claims, which begins on page 4 of this paper.

**Remarks** begin on page 9 of this paper.

**An Appendix** including amended drawing figures is attached following page 12 of this paper.